FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

140	090	77
0	MB APPRO	VAL
_	verage burde	3235-0076 April 30, 2008 n
	SEC USE ON	ILY
Prefix		Serial
		]
D	ATE RECEI	VED

Name of Offering ( check if this is an amendment an	d name has changed, and indicate ch	nange.)						
Sale of Series C preferred stock and any Series C-1 or common stock issuable upon conversion thereof								
Filing Under (Check box(es) that apply):  Rule 504	☐ Rule 505	Rule 506	Section 4(6)	TO ULOTEVED CO				
Type of Filing: New Filing Amer	ndment			1110				
	A. BASIC IDENTIFICA	TION DATA	13/.	2007				
1. Enter the information requested about the issuer.			120	P				
Name of Issuer ( check if this is an amendment and n	ame has changed, and indicate chan	ige.)	<u> </u>					
Data Robotics, Inc.				186 ECIU				
Address of Executive Offices	(Number and Street, City	, State, Zip Code)	Telephone Number	(Including Area Code				
1881-A Landings Drive, Mountain View, CA 9	4043		650-526-3646					
Address of Principal Business Operations (if different from Executive Offices)	(Numb PROCES	(Number Code) Telepho		(Including Area Code)				
		2007						
Brief Description of Business	AUG. I U.	aur R		48475   1011   4027   4011   4827   4101   1127   1111   127   1241				
Storage hardware.	THOMS	ON V						
Type of Business Organization	FINANC							
□ Corporation    □ limited     □	partnership, already formed		(please specify):	07074194				
☐ business trust ☐ limited	partnership, to be formed			01017137				
	Month Year on: 0 4 0  (Enter two-letter U.S. Postal Service CN for Canada; FN for other foreign	5 E Abbreviation for S	•	timated				

#### **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Barrall, Geoff	01 1 15				
Business or Residence Add		•			
c/o Data Robotics, Inc., 18				<u> </u>	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Porteous, William					
Business or Residence Adda	ress (Number and St	treet, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
c/o RRE Ventures at 126 I	East 56th Street; No	ew York, NY 10022			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			.,	
Bhusi, Aneel	·				
Business or Residence Addr	ess (Number and St	treet, City, State, Zip Code)			
c/o Greylock Partners at 8		· · · · · · · · · · · · · · · · · · ·			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or
	<u> </u>			<u>_</u>	Managing Partner
Full Name (Last name first,	if individual)	·		.=	Trialinging 1 articl
Slootman, Frank			•		
Business or Residence Addi	ess (Number and St	treet, City, State, Zip Code)			<u> </u>
c/o Data Robotics, Inc., 18	•				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or
		Beneficial Owner	Executive Officer	Director	Managing Partner
Full Name (Last name first,	if individual)				
Bernal, Ron	·				
Business or Residence Addr		•			
c/o Data Robotics, Inc. 188	1-A Landings Driv	ve, Mountain View, CA 94	043		
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)		•		
Greylock XI Limited Parts	nership and its rela	nted funds			
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			<del></del>
880 Winter Drive; Waltha	m MA 02451				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
RRE Ventures and its rela					
Business or Residence Addr		reet, City, State, Zip Code)			
126 East 56th Street; New		,			

A. BASIC IDEN	TIFICATION DATA									
2. Enter the information requested for the following:										
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>										
Check Box(es) that Apply:  Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual) Sutter Hill Ventures and its related funds										
Business or Residence Address (Number and Street, City, State, Zip Coc 755 Page Mill Road, Suite A-200, Palo Alto, CA 94304-1005	de)	•								
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Coc	de)									
Check Box(es) that Apply:	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Coc	le)									
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Cod	le)									
Check Box(es) that Apply:    Promoter    Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Cod	le)									
Check Box(es) that Apply:  Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Cod	le)									
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Cod	le)									

				В. І	NFORMA'	TION ABO	OUT OFFE	RING				
1. Has th	e issuer solo	l, or does th	e issuer inte		to non-accr			_			Yes	No
2. What i	2. What is the minimum investment that will be accepted from any individual?									\$	N/A	
3. Does t	he offering	permit joint	ownership	of a single	unit?	*******************************				***********	Yes ⊠	No
common offering with a person	ssion or si g. If a pers state or sta s of such a	tion request milar remu on to be list tes, list the broker or de	neration for ed is an ass name of the aler, you m	r solicitati sociated pe e broker o	on of purc rson or age r dealer. If	hasers in on the control of a broken in the control of a broken in the control of	connection ker or deale five (5) pe	with sales r registered rsons to be	of securiti with the Si listed are	ies in the EC and/or		
Full Name	(Last name	first, if indiv	vidual)									
Business or	Residence	Address (Nu	imber and S	Street, City	, State, Zip	Code)						
Name of As	ssociated Br	oker or Dea	ler			<del> </del>					<del></del>	
States in W (Check "Al					Solicit Pur All Stat				·			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[1/]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if indiv	ridual)									
Business or	Residence	Address (Nu	ımber and S	Street, City	, State, Zip	Code)	·		<del></del>			
Name of As	ssociated Br	oker or Dea	ler									
States in W (Check "Al					Solicit Pur All Stat							····
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	(ID)
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	{	[WI]	[WY]	[PR]
Full Name (	Last name	first, if indiv	ridual)									
Business or	Residence.	Address (Nu	ımber and S	Street, City	, State, Zip	Code)						
Name of As	sociated Br	oker or Dea	ler			-				- ***		
States in W (Check "Al	States" or			s)	All Stat							
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N <b>J</b> ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	TT 40 11	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$ 10,782,000.00	\$ 9,999,890.49
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$ 19,782,000.00	\$ 9,999,890.49
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited Investors	30	\$ 9,999,890.49
	Non-accredited Investors	0	\$
	Total (for filings under Rule 504 only)	0	\$0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Ī	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Security	\$
	Regulation A	·	\$
	Rule 504		\$
	Total		
	10(a)		\$0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	oxtimes	\$ 18,025.25
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$ 18,025.25

į.	C. OFFERENCI RICE, NUMBER OF ENTESTORS, EAR ENGES AND USE OF	. 1 1//	JCEEDS			
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 at total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	SS		\$_	10,763,974.	75_
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for ear of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the be to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	οx				
			Payments to			
			Officers, Directors, &		Payments to	
			Affiliates		Others	
	Salaries and fees		\$0.00		\$0	.00
	Purchase of real estate		\$0.00		\$0	.00
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$0	.00
	Construction or leasing of plant buildings and facilities		\$ 8		\$0	.00
	Acquisition of other businesses (including the value of securities involved in this offering that may					
	be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$0.00		\$0	.00
	Repayment of indebtedness		\$		\$0	.00
	Working capital		\$	$\boxtimes$	\$ <u>10,763,974</u>	.75
	Other (specify):		\$0.00		\$0	.00
Co	lumn Totals		\$\$	$\boxtimes$	\$ <u>10,763,974</u>	.75
	Total Payments Listed (column totals added)		⊠ \$	10,70	63,974.75	

	'*	,			 
57. in 1. in 1. in			D. FEDERAL SIGNATURE	· :	

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Data Robotics, Inc.	6.	July 36, 2007
Name of Signer (Print or Type)	Title or Signer (Print or Type)	
Geoff Barrall	Chief Executive Officer	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a	notice on For	m D

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D
  (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Data Robotics, Inc.	6-	July 30, 2007
Name (Print or Type)	Title (Print or Type)	
Geoff Barrall	Chief Executive Officer	

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	2		3			4			5	
·	non-acc	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State AL	Yes	No	Sale of Series C Preferred Stock and any Series C-1 or common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AK										
AZ									<u> </u>	
AR		· · · · · · · · · · · · · · · · · · ·		•				- <del> </del>	-	
CA		x	\$2,332,172.95	24	\$2,332,172.95	0	\$0.00		x	
СО			<b>1</b>		, , , , , , , , , , , , , , , , , , , ,	-	*****	-		
СТ									<del> </del>	
DE	<u> </u>									
DC										
FL										
GA										
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME										
MD							<u>.</u>			
MA		х	\$4,396,717.51	3	\$4,396,717.51	0	\$0.00		х	
MI	<u> </u>									
MN										
MS										

# APPENDIX

1	2		3	4					5	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes		Sale of Series C Preferred Stock and any Series C-1 or common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ										
NE					·					
NV										
NH								<u> </u>		
NJ										
NM										
, NY		х	\$3,271,000.03	3	\$3,271,000.03	0	\$0.00		х	
NC										
ND										
OH										
OK								<u></u>		
OR										
PA										
Rl										
SC					,					
SD										
TN			_							
TX										
UT										
VT										
VA										
WA										
wv				•						
WI					<u>,                                    </u>					

# APPENDIX

1		2	3	4				5	
									ification
			Type of security					under Sta	te ULOE
	Intend to sell to non-accredited investors in State (Part B-Item 1)		and aggregate					(if yes, attach explanation of waiver granted (Part E-Item 1)	
			offering price	Type of investor and amount purchased in State					
			offered in state						
			(Part C-Item 1)	(Part C-Item 2)					
			Sale of Series C					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-
		l	Preferred Stock and any			1			
			Series C-1 or common	Number of		Number of			
			stock issuable upon	Accredited		Non-Accredited		Ì	
State	Yes	No	conversion thereof	Investors	Amount	Investors	Amount	Yes	No
WY									
PR									

**END**